



GREGORY J. SMITH
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County of San Diego
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REQUEST FOR CHANGE OF ADDRESS

FOR YOUR PROPERTY TAXES AND ASSESSMENT INFORMATION

Form Instructions: Fill in parcel information, print, sign and mail form to the address listed above.

PARCEL NUMBER(S)*

(1) | | | | - | | | - | | | - | |

Property Address _____

(2) | | | | - | | | - | | | - | |

Property Address _____

(3) | | | | - | | | - | | | - | |

Property Address _____

(4) | | | | - | | | - | | | - | |

Property Address _____

(5) | | | | - | | | - | | | - | |

Property Address _____

PRINT OWNER'S NAME*

NEW MAILING ADDRESS*

Address Line 1

Address Line 2

Address Line 3

Address Line 4

OWNER'S SIGNATURE*

DATE*

PHONE NUMBER*

*Denotes required information